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PTO/SB/01 (10-00)
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0 7	Under the Paperwor	rk Reduction Act of 1995, no perso	ons are required t			less it contains a valid			
1	DECLARATION			Attorney Doo	cket Number	END-5255			
l	AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION			First Named Inventor Biten		Biten K. Kathra	ni		
ı				COMPLETE IF KNOWN					
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l	(37	CFR 1.63)	ırcharge	Application (Number	10/761,159			
	 Declaration Submitted with Initial Filing 	n 🔯 Declaration Subr OR Initial Filing (Su		Filing Date		January 20, 20	04		
l		(37 CFR 1.16(e))		Group Art U	nit				
				Examiner Na	ame				
Ì	As a below named inventor, I hereby declare that:								
	My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
	MEDICAL DEVICE FOR PROVIDING ACCESS (Title of the Invention)								
İ	the specification of which								
is attached hereto									
OR									
	was filed on (MM/DD/YYYY) 01/20/2004 as United States Application Number or PCT International Application Number 10/761,159 and was amended on (MM/DD/YYYY)								
	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
	I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.								
	Prior Foreign Application Number(s)	Country		Filing Date D/YYYY)	Priority Not Claime		fied Copy tached? NO		
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ŀ	Additional foreign applic	cation numbers are liste	d on a supp	lemental priori	ty data sheet P	TO/SB/02B attac	ched hereto:		

DECLARATION - Utility or Design Patent Application								
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.								
Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.						
I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:								
Application Serial No.	Filing Date	Status						
		Patented Patented Patented						
I hereby appoint:		5. 6 .						
Practitioners at Customer Number AND	000027777	Place Customer Number Bar Code Label Here						
Practitioner(s) named below: Name Registration Number								
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.								
Address all telephone calls to Gerry S. Gressel at telephone number (513) 337-3535.								
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Given Name **Family Name** (first and middle [if any]) Biten K. or Surname KATHRANI Inventor's Date 24th ma Signature ~ 1 Residence: City Mumbai State Maharashtra **Country INDIA** Citizenship Indian **Mailing Address** Ganga Cottage, 2nd & 5th Road Jn. Khar Mumbai State Maharashtra ZIP 400 052 **Country INDIA** I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor **Given Name Family Name** (first and middle [if,any]) Dr. Tehemton E or Surname Udwadia inventor's Signature Residence: City Mumbai State Maharashtra **Country INDIA Mailing Address** 10, Normandie-Carmichael Road City Mumbai State Maharashtra ZIP 400 026 Country INDIA I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF THIRD INVENTOR: A petition has been filed for this unsigned inventor **Given Name Family Name** (first and middle [if any]) Mangesh or Surname Patankar (whomain Inventor's 2004 Signature Residence: City Nashik State Maharashtra **Country INDIA** Citizenship Indian Mailing Address Madhuri, Shikharewadi, Nashik Road - 422101 City Nashik State Maharashtra ZIP 422101 Country INDIA